	Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information university of the PATENT APPLICATION PEE DETERMINATION RECORD Substitute for Form PTO-675							950 K displays a valid OHB control plants Application or Docket Number			
	-	PPLICATION AS FIL (Column 1)		PART I (Column 2)		SMALL ENTITY		OR	OTHER THAN SMALL ENTITY		
	BASIC FEE	NUMBER FILED	HUMBER EX	CTREA	.RATE () FE	5 (\$)		0.477		
y	SEARCH FEE (37 CFR 1.16(N, (I), or (m))						- W		RATE	FEE(4)	
	EXAMINATION FEE (37 OFR 1.18(0), (p), or (q))							- 1		<u>l</u> .	
	TOTAL CLAIMS							.			
	(37 CFR 1.16(1)) INDEPENDENT CLAIMS (37 CFR 1.16(N))	minus 20 minus 3		[]	**	=		ÖR .	х :		
		If the specification a	rid drawlage amoud	100	Х :			1	x .		
1	APPLICATION SIZE FEE (37 CFR 1.16(1))	is \$260 (\$125 for sm additional 50 sheets	application size fee tall entity) for each	due							
1		1 33 U.S.C. 41(a)(1)(6) and 37 CFR 1.16(s		. · .	J					
F	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16())					1				1	
1	If the difference in column	the difference in column 1 is less than zero, enter "0" in column 2.				1	\dashv	_ L		 	
۱.		· ·		••	TOTAL		<u></u> .	•	JATOT		
,	11 000	ION AS AMENDED	– PART II							•	
Ľ			(Column 2) (Column	n 3) .	SMALLE	- - YTITW	. c)R	OTHER	THAN .	
۰			HIGHEST NUMBER PRESE	.,,	- 1		`	<u> </u>	SMALLE	NTITY	
ź	AMEN	TER PR	EVIOUSLY EXTRU		ATE (1)	. ADDI: TIONAL	1	Ŕ	ATE (1)	ADDI-	
ENDMENT	Total. (37 CFR 1,16(i))	Minus **	20 0			FEE (\$)		<u> </u>		TIONAL FEE (\$)	
2	Independent I	Minus ***	5	7 F	25.00		_ OR	×£	2.00=	/ :	
S	Application Size Fee (37	CFR 1 16(e))		<u>*K</u>	N) -00=		GR	×20	20.00=		
⋖		MULTIPLE DEPENDENT CL					1 .				
	·	MOLTIPLE DEPENDENT CU	AIM (37 CFR 1.16(II)	_ -			OR.				
	*, *			TOT	AL 'L FEE		OR.	TOTA	L FEE	1	
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- [AFTE AMENDA	R PREV	IOUSLY EXTRA	RA	TE (\$)	ADDI- TIONAL	· .	RAT	E (\$)	ADDI-	
!	Total (27 cfr 1.16(1))	Minus +	FOR		 _!	FEE (\$)				TIONAL FEE (\$)	
П	Independent D7 CFR-1,16(N)	Minus ***		X*	=		OR	X	=,		
-	Application Size Fee (37 Cr	1 1 .		×	=		QR	x	=		
1				1	-1						
ـــا	IRST PRESENTATION OF MU	IL TIPLE DEPENDENT CLAIM	(37 CFR 1.16(i))	<u> </u>			OR				
				JATOT			OR:	TOTAL			
IC.	line entry in column t is to-	•		ADDIL	- CE	- 1		ADD'L F	ee .		

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter 30.

The "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter 30.

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This collection of information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

ADDRESS. SEND T.O: Commissioner for Patonis, P.O. Box 1450, Alexandria; VA 22313-1450.

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